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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/733,345	12/12/2003	Gorsev Pristine	P1977US00	7456
54640 7590 12/24/2008 PERRY + CURRIER INC. 1300 YONGE STREET SUITE 500 TORONTO, ON M4T-1X3 CANADA				
EXAMINER ALTSCHUL, AMBER L				
ART UNIT 3686		PAPER NUMBER		
MAIL DATE 12/24/2008		DELIVERY MODE PAPER		

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Office Action Summary

Application No.

10/733,345

Applicant(s)

PRISTINE, GORSEV

Examiner

AMBER L. ALTSCHUL

Art Unit

3686

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --
Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 26 September 2008.
- 2a) ☒ This action is **FINAL**. 2b) ☐ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 1-18 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 1-18 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on _____ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
 2. ☐ Certified copies of the priority documents have been received in Application No. _____.
 3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- 1) ☒ Notice of References Cited (PTO-892)
- 2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-946)
- 3) ☐ Information Disclosure Statement(s) (PTO/SG/US)
Paper No(s)/Mail Date _____
- 4) ☐ Interview Summary (PTO-413)
Paper No(s)/Mail Date _____
- 5) ☐ Notice of Informal Patent Application
- 6) ☐ Other: _____

DETAILED ACTION

Response to Amendment

1. This communication is in response to the amendment filed on September 26, 2008.
Claims 1-18 are pending in this present application. Claims 1, 8, 15, and 16 have been amended.

Claim Rejections - 35 USC § 102

2. The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

(e) the invention was described in (1) an application for patent, published under section 122(b), by another filed in the United States before the invention by the applicant for patent or (2) a patent granted on an application for patent by another filed in the United States before the invention by the applicant for patent, except that an international application filed under the treaty defined in section 351(a) shall have the effects for purposes of this subsection of an application filed in the United States only if the international application designated the United States and was published under Article 21(2) of such treaty in the English language.

3. Claims 1-18 are rejected under 35 U.S.C. 102(e) as being anticipated by United States Patent Application Publication Number US 2002/0077865, Sullivan, et al., hereinafter Sullivan.
4. (Currently Amended) Regarding claim 1, Sullivan teaches a computing device for location proximal to a waiting area of a hospital emergency room and for intake of a patient in said hospital emergency room comprising:

a touch-screen operable to receive input by allowing said patient to depress active portions along the surface of said touch-screen, said touch screen further operable to display information to said patient, (page 3, para. 66);

said computing device further comprising a set of headphones connected to said computing device for presenting audio output to said patient, (page 5, para. 85); and

wherein said computing device is configured to receive an identification of said patient and a preferred language of said patient, and further operable to present on said touch screen at least one main question and a plurality of dependent questions presented based on a response to said main question and responses to previous dependent questions, said questions presented in said preferred language of said patient, said questions pertaining to an intake procedure of said patient to said hospital, said device further operable to receive responses to each of said of said questions by touch screen input from said patient, said device further operable to generate an intake report based on said responses in a preferred language of a hospital staff member responsible for further processing of said intake of said patient, (abstract, page 8, para. 125)

5. (previously presented) Regarding claim 2, Sullivan teaches the device of claim 1 as described above. Sullivan further teaches wherein said computing device is attachable to a printing device local to said computing device and wherein said report is generated at said printing device, (page 8, para. 125).

6. (previously presented) Regarding claim 3, Sullivan teaches the device of claim 1 as described above. Sullivan further teaches wherein said computing device is connected to an intake server via a network, and wherein said report is delivered to said intake server, (page 4, para. 75).

7. (previously presented) Regarding claim 4, Sullivan teaches the device of claims 1 and 3 as described above. Sullivan further teaches wherein said intake server is attachable to a printing

device local to said intake server and wherein said report is generated at said printing device, (page 9, para. 134).

8. (previously presented) Regarding claim 5, Sullivan teaches the device of claims 1 and 3 as described above. Sullivan further teaches wherein said intake server is connected to a plurality of treatment room client computing devices via said network, and wherein said treatment room clients include an output device, (page 7, para. 114).

9. (previously presented) Regarding claim 6, Sullivan teaches the device of claim 1 as described above. Sullivan further teaches wherein said device is mounted within the housing of a Kiosk, (page 3, para. 66).

10. (previously presented) Regarding claim 7, Sullivan teaches the device of claim 1 as described above. Sullivan further teaches wherein said device is a stand-alone personal computer, (page 4, para. 78).

11. (currently amended) Regarding claim 8, Sullivan teaches in a computing device for location proximal to a waiting area of a hospital emergency room comprising a touch-screen operable to receive input by allowing depression of active portions along the surface of said touch-screen, said touch screen further operable to display information, a method for intake of a patient in said hospital emergency room, (page 3, para. 66), comprising the steps of:

receiving input from said touch screen representing a preferred language of said patient, (abstract, page 8, para. 125);

receiving input from said touch screen representing an identification of said patient, (abstract, page 8, para. 125);

- presenting an intake question to said patient on said touch-screen, (pages 3-4, para. 67);
receiving input from said touch screen representing a responses to said intake questions, (pages 3-4, para. 67);
repeating said presenting of said intake question and receiving of said responses steps based on responses to previous intake questions until a desired number of intake question responses have been received, (pages 3-4, para. 67); and
generating an intake report in a preferred language of a hospital staff member responsible for further intake of said patient, (abstract, page 8, para. 125).
12. (previously presented) Regarding claim 9, Sullivan teaches the method of claim 8 as described above. Sullivan further teaches wherein said computing device is attachable to a printing device local to said computing device and wherein said report is generated at said printing device, (page 9, para. 134).
13. (previously presented) Regarding claim 10, Sullivan teaches the method of claim 8 as described above. Sullivan further teaches wherein said computing device is connected to an intake server via a network, and wherein said report is delivered to said intake server, (page 4, para. 75).
14. (previously presented) Regarding claim 11, Sullivan teaches the method of claims 8 and 10 as described above. Sullivan further teaches wherein said intake server is attachable to a printing device local to said intake server and wherein said report is generated at said printing device, (page 9, para. 134).

15. (previously presented) Regarding claim 12, Sullivan teaches the method of claims 8 and 10 as described above. Sullivan further teaches wherein said intake server is connected to a plurality of treatment room client computing devices via said network, and wherein said treatment room clients include an output device, said intake server operable to determine an available one of said treatment rooms and to direct said report to said treatment room client computing device respective to said available one, (page 7, para. 114).

16. (previously presented) Regarding claim 13, Sullivan teaches the method of claim 8 as described above. Sullivan further teaches wherein said computing device is mounted within the housing of a kiosk, (page 3, para. 66).

17. (previously presented) Regarding claim 14, Sullivan teaches the method of claim 8 as described above. Sullivan further teaches wherein said computing device is a stand-alone personal computer, (page 4, para. 78).

18. (currently amended) Regarding claim 15, Sullivan teaches a computer readable media for storing programming instructions for use with a computing device for location proximal to a waiting area of a hospital emergency room comprising a touch-screen operable to receive input by allowing depression of active portions along the surface of said touch-screen, said touch screen further operable to display information, and a method for intake of a patient in said hospital emergency room, (page 3, para. 66), comprising the steps of:

receiving input from said touch screen representing a preferred language of said patient, (abstract, page 8, para. 125);

receiving input from said touch screen representing an identification of said patient, (abstract, page 8, para. 125);

presenting an intake question to said patient on said touch-screen, (pages 3-4, para. 67);

receiving input from said touch screen representing a responses to said intake questions, (pages 3-4, para. 67);

repeating said presenting of said intake question and receipt of said responses steps based on responses to previous intake questions until a desired number of intake question responses have been received, (pages 3-4, para. 67); and

generating an intake report in a preferred language of a hospital staff member responsible for further intake of said patient, (abstract, page 8, para. 125).

19. (currently amended) Regarding claim 16, Sullivan teaches a system for intake of a patient in said hospital emergency room comprising at least one computing device associated with a waiting area of a hospital emergency room, (page 7, para. 114), and a comprising:

a touch-screen operable to receive input by allowing said patient to depress active portions along the surface of said touch-screen, said touch screen further operable to display information to said patient, (page 3, para. 66);

said computing device further comprising a set of headphones connected to said computing device for presenting audio output to said patient, (page 5, para. 85);

and wherein said computing device is configured to receive an identification of said patient and a preferred language of said patient, and further operable to present on said touch screen at least one main question and a plurality of dependent questions presented based on a

response to said main question and responses to previous dependent questions, said questions presented in said preferred language of said patient, said questions pertaining to an intake procedure of said patient to said hospital, said computing device further operable to receive responses to each of said questions by touch screen input from said patient, said computing device further operable to generate an intake report based on said responses in a preferred language of a hospital staff member responsible for further processing of said intake of said patient, (abstract, page 8, para. 125);

said system further comprising an intake server for connection to said computing devices and for receiving intake reports generated thereby, (page 4, para. 75);

said system further comprising a plurality of treatment room clients connected to said intake server, said treatment room clients including an output device operable to present said intake reports, (page 4, para. 75 and page 8, para. 125);

said server operable to direct said intake reports to an appropriate one of said treatment room clients according to a prioritization criteria, (page 7, para. 117).

20. (previously presented) Regarding claim 17, Sullivan system the method of claim 16 as described above. Sullivan further teaches wherein said device is a kiosk located in said waiting room, (page 3, para. 66).

21. (previously presented) Regarding claim 18, Sullivan system the method of claim 16 as described above. Sullivan further teaches wherein said device is a wireless portable computing device operable to connect with said server via a wireless network such that a patient en route to

said hospital can complete at least some of said questions prior to arrival at said hospital, (page 4, paragraphs 72 and 75).

Response to Arguments

22. Applicant's arguments filed September 26, 2008 have been fully considered but they are not persuasive. Applicant's arguments will be addressed hereinbelow in the order in which they appear in the response filed September 26, 2008.

(A) At page 8 of the September 26, 2008 response, Applicant argues that Sullivan fails to disclose a set of headphones connected to said computing device for presenting audio output to said patient.

In response, the Examiner respectfully disagrees. It is readily apparent that Sullivan discloses use of audible alarms, (see Sullivan, paragraph 82). Thus, the Examiner respectfully contends that Sullivan's audible alarms system is an art recognized equivalent to applicant's said computing device for presenting audio output to said patient.

(B) At pages 8-9 of the September 26, 2008 response, Applicant argues that Sullivan fails to disclose a preferred language of a patient.

In response, the Examiner respectfully disagrees. It is readily apparent that Sullivan teaches a preferred language of a patient, (See Sullivan, Figure 2). Thus, the Examiner respectfully contends that Sullivan's templates containing fields into which data may be entered is an art recognized equivalent to applicant's preferred language of a patient.

(C) At pages 9-10 of the September 26, 2008 response, Applicant asserts that Claims 2-7 are dependent from Applicant's independent claim 1 and requests that the rejection of these claims be withdrawn. Examiner respectfully disagrees and reiterates the rejections of claim 2-7 as noted by the citations above. As such, Applicant's remarks with regard to the application of Sullivan to these claims are moot in the above Office Action.

(D) At page 10 of the September 26, 2008 response, Applicant asserts, regarding claim 8, the same arguments as presented in Section B of the response to arguments above. Examiner reiterates the response to argument as presented in section B of the response to arguments above.

(E) At page 10 of the September 26, 2008 response, Applicant asserts that Claims 9-14 are dependent from Applicant's independent claim 8 and requests that the rejection of these claims be withdrawn. Examiner respectfully disagrees and reiterates the rejections of claim 9-14 as noted by the citations above. As such, Applicant's remarks with regard to the application of Sullivan to these claims are moot in the above Office Action.

(F) At pages 10-11 of the September 26, 2008 response, Applicant asserts, regarding claim 15, the same arguments as presented in Section B of the response to arguments above. Examiner reiterates the response to argument as presented in section B of the response to arguments above.

(G) At pages 11-12 of the September 26, 2008 response, Applicant asserts, regarding claim 16, the same arguments as presented in Section A of the response to arguments above. Examiner reiterates the response to argument as presented in section A of the response to arguments above.

(H) At page 12 of the September 26, 2008 response, Applicant asserts that Claims 17-18 are dependent from Applicant's independent claim 16 and requests that the rejection of these claims

be withdrawn. Examiner respectfully disagrees and reiterates the rejections of claim 17-18 as noted by the citations above. As such, Applicant's remarks with regard to the application of Sullivan to these claims are moot in the above Office Action.

23. Applicant's arguments with respect to claims 1-18 have been considered but are moot in view of the new ground(s) of rejection.

Conclusion

24. The prior art made of record and not relied upon is considered pertinent to applicant's disclosure. The cited but not applied art teaches Patient point of care computer system (US 2002/0044059 A1), Method using central epidemiological database (US 5911132 A), Electronic medical records system (US 5924074 A), Method and system for anonymously testing for a human malady (US 5978466 A), Danger warning and emergency response system and method (US 6084510 A), Sickel guard air system (US 6085510 A), System and method for communicating medical records using bar coding (US 6088695 A), Integrated emergency medical transportation database system (US 6117073 A), Health care information and data tracking system and method (US 6148297 A), Remote health monitoring system (US 6171237 B1), Medical non-intrusive prevention based on network of embedded systems (US 6238337 B1), Chronic disease monitor (US 6277071 B1), System for monitoring and managing the health care of a patient population (US 6385589 B1), Method of and apparatus for evaluation and mitigation of microsleep events (US 6511424 B1), Method and apparatus for authenticating informed consent (6149440).

25. Applicant's amendment necessitated the new ground(s) of rejection presented in this Office action. Accordingly, **THIS ACTION IS MADE FINAL**. See MPEP § 706.07(a). Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire **THREE MONTHS** from the mailing date of this action. In the event a first reply is filed within **TWO MONTHS** of the mailing date of this final action and the advisory action is not mailed until after the end of the **THREE-MONTH** shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than **SIX MONTHS** from the date of this final action.

26. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Amber L. Altschul whose telephone number is (571) 270-1362. The examiner can normally be reached on M-Th 7:30-5, F 7:30-4, every other Friday off.

27. If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Gerald J. O'Connor can be reached at (571) 272-6787. The fax phone numbers for the organization where this application or proceeding is assigned are (571) 273-8300.

28. Any inquiry of a general nature or relating to the status of this application or proceeding should be directed to the receptionist whose telephone number is (571) 272-8219.

29. Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications

may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or (571) 272-1000.

/A. L. A./

Examiner, Art Unit 3686

December 21, 2008

/Gerald J. O'Connor/
Supervisory Patent Examiner
Group Art Unit 3686